

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000363241

**Entity Name:** 2738 THARPE LLC

**Current Principal Place of Business:**

5745 NW 72 WAY  
PARKLAND, FL 33067

**Current Mailing Address:**

5745 NW 72 WAY  
PARKLAND, FL 33067 US

**FEI Number:** 87-2215336

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ACCOUNTING MAX SERVICES INC  
6635 W COMMERCIAL BLVD  
STE 101  
TAMARAC, FL 33319 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MANAGER
Name	BRANNEN, VALERIA	Name	BRANNEN, ROBERT WESLEY
Address	5745 NW 72 WAY	Address	5745 NW 72 WAY
City-State-Zip:	PARKLAND FL 33067	City-State-Zip:	PARKLAND FL 33067

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** VALERIA BRANNEN

**MANAGER**

**02/15/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date